

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

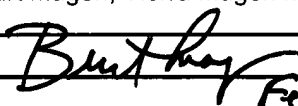
Application Number	10/766,116
Filing Date	January 27, 2004
First Named Inventor	Guterman
Art Unit	
Examiner Name	
Attorney Docket Number	SAND-01016US0

Total Number of Pages in This Submission

### ENCLOSURES (Check all that apply)

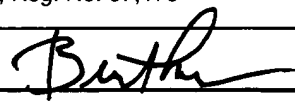
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| <input type="checkbox"/> Fee Transmittal Form                                | <input type="checkbox"/> Drawing(s)                                       | <input type="checkbox"/> After Allowance communication to Group                            |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input type="checkbox"/> Amendment/Reply                                     | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation                    | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Change of Correspondence Address                 | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):            |
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| <input checked="" type="checkbox"/> Information Disclosure Statement         | <input type="checkbox"/> Request for Refund                               |  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> CD, Number of CD(s) _____                        |  |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application    | Remarks   |  |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |  |

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Burt Magen, Vierra Magen Marcus Harmon & DeNiro LLP
Signature	
Date	FEB 13, 2004

### CERTIFICATE OF TRANSMISSION/MAILING

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